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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/809,736
	Filing Date	March 25, 2004
	First Named Inventor	Hayes, et al.
	Art Unit	
	Examiner Name	
	Attorney Docket Number	Prairie.830010.US0

I hereby revoke all previous powers of attorney given in the above-identified application.					
<input type="checkbox"/> A Power of Attorney is submitted herewith. OR <input checked="" type="checkbox"/> I hereby appoint the practitioners associated with the Customer Number: <div style="text-align: right;">  26582 </div>					
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<input type="checkbox"/> Applicant/Inventor <input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73 (b) enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Name	Jon Ishii				
Signature					
Date	8/30/07	Telephone	(402) 398-4170		
NOTE: Signature of all the inventors or assignees of record of the entire interest of their representative (s) are required. Submit multiple form if more than one signature is required, see below*.					
<input checked="" type="checkbox"/> *Total of 1 forms are submitted.					

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